Fill	in this informa	tion to identify your	case:			
Deb	tor 1	Vivian Birdelle Sa	muel			
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
` '		ruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN		
Cac	e number 19	-54990-mlo				
(if kno		-54990-11110			☐ Check	t if this is an
					amen	ded filing
Oπ.	iiaial Faun	4000				
		<u>n 106Sum</u> Your Assets (and Liabilities on	nd Cartain Statistical Information		10/45
				nd Certain Statistical Information are filing together, both are equally responsible for		12/15
	original forms			ne information on this form. If you are filing amend k the box at the top of this page.		
					Your a	ssets of what you own
1.	Schedule A/B 1a. Copy line 5	: Property (Official Fo 55, Total real estate, fr	orm 106A/B) om Schedule A/B		\$	0.00
	1b. Copy line 6	62, Total personal prop	perty, from Schedule A/B		\$	18,257.00
	1c. Copy line 6	63, Total of all property	on Schedule A/B		\$	18,257.00
Part	2: Summar	ize Your Liabilities				
						abilities t you owe
2.			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	9,038.00
3.			Unsecured Claims (Official 1) (priority unsecured claim	I Form 106E/F) as) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the t	total claims from Part 2	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	27,915.00
				Your total liabilities	\$	36,953.00
Part	3: Summar	ize Your Income and	Expenses			
4.		our Income (Official Fo) I	\$	3,117.57
5.		ndined monthly income our Expenses (Official		1	¥	·
					\$	3,112.00
Part	4: Answer	These Questions for	Administrative and Stati	istical Records		
6.			er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with yo	ur other sch	nedules.

Yes

What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,550.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Don't A on Colondala F/F compthe following	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1,586.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,586.00

	in this information to identify your case and	I this filing:		
Deb	tor 1 Vivian Birdelle Samuel			
Dob	First Name Mi tor 2	ddle Name Last Name		
		ddle Name Last Name		
Jnit	ed States Bankruptcy Court for the: EASTER	RN DISTRICT OF MICHIGAN		
ിട	e number 19-54990-mlo			☐ Check if this is a
<i>-</i>	19-34330-11110			☐ Check if this is a amended filing
)ff	icial Form 106A/B			
36	hedule A/B: Property			12/15
		ist an asset only once. If an asset fits in more than or	e category, list the asset	in the category where you
		sible. If two married people are filing together, both ar e sheet to this form. On the top of any additional page		
	er every question.	e sheet to this form. On the top of any additional page	s, write your flame and co	ase number (ii known).
art	1: Describe Each Residence, Building, Land, or	Other Real Estate You Own or Have an Interest In		
	· · · · · · · · · · · · · · · · · · ·			
Do	you own or have any legal or equitable interest i	in any residence, building, land, or similar property?		
	■ No. Go to Part 2.			
	☐ Yes. Where is the property?			
.1		What is the property? Check all that apply		
		Single-family home		claims or exemptions. Put ired claims on Schedule D:
	Street address, if available, or other description	☐ Duplex or multi-unit building		laims Secured by Property.
			Current value of the entire property?	Current value of the portion you own?
	City State ZIP Code	☐ Manufactured or mobile home	\$	_ \$
		☐ Land		
		<u> </u>		
		☐ Investment property		
		☐ Timeshare		
		☐ Timeshare ☐ Other		
		☐ Timeshare		enancy by the entireties, o
		☐ Timeshare ☐ Other Who has an interest in the property? Check one	(such as fee simple, to	enancy by the entireties, o
		☐ Timeshare ☐ Other Who has an interest in the property? Check one	(such as fee simple, to	enancy by the entireties, o
	County	☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only	(such as fee simple, to a life estate), if known	
	County	☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	(such as fee simple, to a life estate), if known	enancy by the entireties, o
	County	☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	(such as fee simple, to a life estate), if known Check if this is co (see instructions)	enancy by the entireties, c
	County	☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(such as fee simple, to a life estate), if known Check if this is co (see instructions)	enancy by the entireties, c
	County	☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite	(such as fee simple, to a life estate), if known Check if this is co (see instructions)	enancy by the entireties, o
		☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite	(such as fee simple, to a life estate), if known Check if this is co (see instructions) em, such as local	enancy by the entireties, (

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt	tor 1 Vivian Birdelle Samuel		Case number (if known)	19-54990-mlo
3. C a	ars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
п	No			
	Yes			
_	100			
3.1	Make: Lincoln	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model: MKZ	■ Debtor 1 only		secured claims on Schedule D: re Claims Secured by Property.
	Year: 2011	Debtor 2 only	Current value of t	he Current value of the
	Approximate mileage: 200,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$2,500	.00 \$2,500.00
5 A .p.	No Yes Add the dollar value of the portion you ovages you have attached for Part 2. Write 3: Describe Your Personal and Household I you own or have any legal or equitable in		ng any entries for	\$2,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
E	ousehold goods and furnishings Examples: Major appliances, furniture, linens No Yes. Describe	s, china, kitchenware		
	Household furi	nishings		\$700.00
E	ectronics Examples: Televisions and radios; audio, vice including cell phones, cameras, radios. No Yes. Describe Printer	deo, stereo, and digital equipment; computers, p media players, games	orinters, scanners; music co	ollections; electronic devices
E	other collections, memorabilia, coll No Yes. Describe	, prints, or other artwork; books, pictures, or othe ollectibles	er art objects; stamp, coin,	
	Books			\$10.00
E	quipment for sports and hobbies Examples: Sports, photographic, exercise, a musical instruments No Yes. Describe	nd other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes a	and kayaks; carpentry tools;

Debtor 1	Vivian Birde	lle Samuel		Case number (if known)	19-54990-mlo
10. Firea		a abatauna ammunitian and	related equipment		
	•	s, shotguns, ammunition, and	related equipment		
■ No	s. Describe				
⊔ те	s. Describe				
11. Cloti					
		othes, furs, leather coats, des	signer wear, shoes, accessories		
□ No	s. Describe				
■ Ye	s. Describe				
		Wardrobe			\$200.00
12. Jew e Exa		welry costume iewelry engag	gement rings, wedding rings, heirlod	om iewelry watches gems o	old silver
□ No		wony, ocolumo jowony, onga	goment imge, wedamig imge, nemec	om joweny, waterice, geme, g	ora, onvor
■ Ye	s. Describe				
		Costume Jewelry			\$100.00
13. Non-	farm animals				
	mples: Dogs, cats, I	oirds, horses			
□ No					
■ Ye	s. Describe				
		Dog			\$100.00
		Dog			Ψ100.00
_	-	d household items you did	not already list, including any he	alth aids you did not list	
■ No					
⊔ Ye	s. Give specific info	ormation			
					-
15 Add	d the dollar value (of all of your entries from P	art 3, including any entries for pa	ines you have attached	
				igoo you navo attaonou	\$1,185.00
Part 4:	Describe Your Finance	rial Assats			
		egal or equitable interest in	any of the following?		Current value of the
,		3	,		portion you own?
					Do not deduct secured claims or exemptions.
					ciains of exemptions.
16. Cas ł					
		nave in your wallet, in your ho	ome, in a safe deposit box, and on h	and when you file your petition	on
■ No					
⊔ Ye	·S				
17 Don	soito of manay				
	osits of money <i>mples:</i> Checking, sa	avings, or other financial acco	ounts; certificates of deposit; shares	in credit unions, brokerage h	nouses, and other similar
	institutions.		s with the same institution, list each.		,
□ No)		1 20 2		
■ Ye	s		Institution name:		
		17.1. Checking	Chase		\$1,072.00

De	btor 1	Vivian Birdelle Sam	nuel		Case number (if known)	19-54990-mlo
	Examp	mutual funds, or public les: Bond funds, investm		ge firms, money market accounts	S	
	■ No □ Yes		Institution or issuer name	9:		
	Non-pu joint ve ■ No		interests in incorporate	ed and unincorporated business	ses, including an interes	et in an LLC, partnership, and
	□ Yes.	Give specific information Na ——	about them me of entity:		% of ownership:	
	Negotia Non-ne ■ No	able instruments include	personal checks, cashiers those you cannot transfer	e and non-negotiable instrume of checks, promissory notes, and in the to someone by signing or deliver	money orders.	
			uer name:			
1	Examp. ■ No	List each account separa	SA, Keogh, 401(k), 403(b)), thrift savings accounts, or other Institution name:	r pension or profit-sharing	plans
	Your sh Examp ■ No		ts you have made so that	you may continue service or use c utilities (electric, gas, water), tel Institution name or individual:		nies, or others
	Annuition ■ No □ Yes		dic payment of money to	you, either for life or for a number	r of years)	
		C. §§ 530(b)(1), 529A(b),	and 529(b)(1).	ied ABLE program, or under a c		
	No	equitable or future inte		than anything listed in line 1), a		ercisable for your benefit
	Examp. ■ No		es, websites, proceeds fro	her intellectual property om royalties and licensing agreen	ments	

De	ebtor 1	Vivian Birdelle Samuel		Case number (if known) 1	9-54990-mlo
27.		es, franchises, and other gene			
	'	oles: Building permits, exclusive I	icenses, cooperative association holdings, liquor lic	censes, professional licenses	
	■ No	Give specific information about	hom		
	□ 165.	Give specific information about	nem		
		<u></u>		·	
М	onev or	property owed to you?			Current value of the
	oo, o.	proporty office to your			portion you own?
					Do not deduct secured claims or exemptions.
					dains of exemptions.
28.	. Tax ref □ No	funds owed to you			
		Give specific information about t	nem, including whether you already filed the returns	s and the tay years	
	— 163.	Oive specific information about t	iem, including whether you already filed the return	s and the tax years	
			10040		#0.500.00
			Accrued 2019 income tax refunds	Federal and State	\$3,500.00
29.		support			
	Exam _i ■ No	oles: Past due or lump sum alimo	ny, spousal support, child support, maintenance, d	ivorce settlement, property se	ttlement
		Give specific information			
	□ 163.	Oive specific information			
30.		amounts someone owes you			
	Examp	oles: Unpaid wages, disability ins benefits; unpaid loans you r	urance payments, disability benefits, sick pay, vaca nade to someone else	ation pay, workers' compensa	ition, Social Security
	■ No	bononto, unpala loano you i	nade to someone cise		
	☐ Yes.	Give specific information			
31.		ts in insurance policies			
	_	oles: Health, disability, or life insu	rance; health savings account (HSA); credit, home	owner's, or renter's insurance	
	∐ No	Name that the same and the same and the	and the order of the Constant		
	■ Yes.	Name the insurance company of Company		iciary:	Surrender or refund
				,,.	value:
		State Fa	rm		\$10,000.00
		<u> </u>			Ψ10,000.00
00	A !		from company who has died		
32.			bu from someone who has died t, expect proceeds from a life insurance policy, or a	are currently entitled to receive	e property because
		one has died.		•	,
	■ No				
	☐ Yes.	Give specific information			
33.	Claims	against third parties, whether	or not you have filed a lawsuit or made a dema	nd for payment	
	Exam		utes, insurance claims, or rights to sue		
	■ No				
	⊔ Yes.	Describe each claim			

Debtor	r 1	Vivian Birdell	le Samuel	Case number (if known)	19-54990-mlo
34. Otl	her	contingent and u	nliquidated o	claims of every nature, including counterclaims of the debtor and rights to	set off claims
		Describe each cla	aim		
ш,	I U S.	Describe each cia	all11		
35. An ■ N	-	nancial assets yo	u did not alr	eady list	
		Give specific info	rmation		
		•			
				entries from Part 4, including any entries for pages you have attached	\$14,572.00
	J	art ii viino tiiat ii	u		
Part 5:	De	scribe Any Busines	s-Related Pro	perty You Own or Have an Interest In. List any real estate in Part 1.	
			gal or equitabl	e interest in any business-related property?	
		o to Part 6. So to line 38.			
		50 to iiii 0 00.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Ac	cou	nts receivable or	commission	ns you already earned	·
				, ,	
		Describe			
39. Off <i>E</i> x	fice kamp	equipment, furnis ples: Business-rela	shings, and a ated compute	supplies rs, software, modems, printers, copiers, fax machines, rugs, telephones, desks,	chairs, electronic devices
ПΙ	res.	Describe			
40. Ma	chir	nery, fixtures, equ	uipment, sup	oplies you use in business, and tools of your trade	
	No				
	es.	Describe			
41. In	vent	tory			
	No				
		Describe			
42. Int e	eres	sts in partnership	s or joint ve	ntures	
		· •	•		
		Give specific info	rmation abou	it them	
		•	Name of		
				0/_	

Debtor 1	Vivian Birde	lle Samuel	Case number (if known)	19-54990-mlo
43. Cust	omer lists, mailin	g lists, or other compilations		
□ Do y	our lists include per	rsonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□ No □ Yes. Describe	3		
				7
44. Any	business-related	property you did not already list		
□ No	s. Give specific info	ormation		
<u> </u>	s. Olve specific fillo	maton		
		of all of your entries from Part 5, including any entries for pa number here		
		and Commercial Fishing-Related Property You Own or Have an Intere interest in farmland, list it in Part 1.	est In.	
-	ou own or have and	ny legal or equitable interest in any farm- or commercial fishi	ng-related property?	
	es. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
	n animals mples: Livestock, p	oultry, farm-raised fish		
□ No □ Ye	S			
	1			
49 Cron	ا s—either growing	y or harvostad		
		y or man vested		
□ No □ Ye	s. Give specific info	ormation		
	,			
40 Earn	and fishing oqui	pment, implements, machinery, fixtures, and tools of trade		
		prinent, implements, macrimery, fixtures, and tools of trade		
□ No □ Ye	S			
	[
50. Farm	ا and fishing supp	olies, chemicals, and feed		
□ No	ı			
	S			
51. Any	farm- and comme	rcial fishing-related property you did not already list		
□ No	ı			
☐ Ye	s. Give specific info orm 106A/B	ormation Schedule A/B: Property		page 7

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Debt	tor 1 Vivian Bird	lelle Samuel		Case number (if known)	19-54990-mlo
52.		e of all of your entries from Part 6, includir tt number here			
Part	7: Describe All I	Property You Own or Have an Interest in That Yo	u Did Not List Above		
		roperty of any kind you did not already list ckets, country club membership			
54.		e of all of your entries from Part 7. Write th of Each Part of this Form	at number here		\$0.00
55.	Part 1: Total real es	state, line 2			\$0.00
56.57.58.59.60.	Part 2: Total vehicl Part 3: Total perso Part 4: Total finance Part 5: Total busine Part 6: Total farm-	es, line 5 nal and household items, line 15	\$2,500.00 \$1,185.00 \$14,572.00 \$0.00 \$0.00		
62.	Total personal pro	perty. Add lines 56 through 61	\$18,257.00	Copy personal property to	stal \$18,257.00
63.	Total of all propert	on Schedule A/B. Add line 55 + line 62			\$18,257.00

Fill in this inform	mation to identify your	case:		
Debtor 1	Vivian Birdelle Sa	amuel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
	19-54990-mlo			
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/E	Sthat you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Household furnishings Line from Schedule A/B: 6.1	\$700.00		\$700.00	11 U.S.C. § 522(d)(3)
	Line Holli Schedule Arb. 0.1			100% of fair market value, up to any applicable statutory limit	
	Printer Line from Schedule A/B: 7.1	\$75.00		\$75.00	11 U.S.C. § 522(d)(3)
	Line Holli Galledale A.D. 1.1			100% of fair market value, up to any applicable statutory limit	
	Books Line from Schedule A/B: 8.1	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
	Line Holli Galledale A.D. G.1			100% of fair market value, up to any applicable statutory limit	
	Wardrobe Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	Line Holli Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Costume Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
Dog Line from Schedule A/B: 13.1	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(3)
Line Irom Scriedule A/B. 13.1			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Line from Schedule A/B: 17.1	\$1,072.00		\$1,072.00	11 U.S.C. § 522(d)(5)
Line IIIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Federal and State: Accrued 2019 income tax refunds	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
State Farm Line from Schedule A/B: 31.1	\$10,000.00		100%	11 U.S.C. § 522(d)(7)
Line from Scriedule A/B. 31.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every ■ No ■ Yes. Did you acquire the property cove	3 years after that for ca	ises fi	,	,

Yes

Fill in this informat	ion to identify you				
Fill in this informat					
Debtor 1	Vivian Birdelle	Samuel Middle Name Last Name		-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bankr	uptcy Court for the	: EASTERN DISTRICT OF MICHIGAN			
Case number 19-	E4000 mla				
(if known)	54990-mlo			☐ Check	if this is an
,					ded filing
Official Form 1	106D				
		Who Have Claims Secured	by Propert	У	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do any creditors have	ve claims secured b	y your property?			
☐ No. Check th	is box and submit t	his form to the court with your other schedules. Yo	u have nothing else	to report on this form.	
_	of the information	·	g		
Part 1: List All S	ecured Claims				
			Column A	Column B	Column C
for each claim. If more	than one creditor has	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 OneMain Fir	nancial	Describe the property that secures the claim:	\$9,038.00	\$2,500.00	\$6,538.00
Creditor's Name		2011 Lincoln MKZ 200,000 miles			
Attn: Bankru Po Box 3251	ı	As of the date you file, the claim is: Check all that apply.			
Evansville, I	-	Contingent			
Number, Street, City	y, State & Zip Code	☐ Unliquidated			
Who owes the debt?	? Check one.	LI Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or sect	ıred		
Debtor 2 only		car loan)			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the o	•	☐ Judgment lien from a lawsuit			
Check if this claim community debt		Other (including a right to offset) Auto loan			
	Opened 08/18 Last Active				
Date debt was incurre	ed 9/12/19	Last 4 digits of account number 4768			
Add the dollar value	e of your entries in C	Column A on this page. Write that number here:	\$9,0	38.00	
		the dollar value totals from all pages.		38.00	
Write that number h	iere:		Ψ3,0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in this inforr	mation to identify your case:				
Debtor 1	Vivian Birdelle Samuel				
Dobtor 2	First Name Mic	dle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name Mic	dle Name Last Name			
United States Ba	inkruptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN			
Officed States Ba	inkruptcy Court for the. LASTE	NA DISTRICT OF MICHIGAN			
_	19-54990-mlo				
(if known)				_	t if this is an ded filing
				ameni	ued ming
Official Forn	n 106E/F				
Schedule E	F: Creditors Who Ha	ve Unsecured Claims			12/15
any executory cont Schedule G: Execu Schedule D: Credit left. Attach the Con name and case nur	tracts or unexpired leases that could story Contracts and Unexpired Lease tors Who Have Claims Secured by Pr ntinuation Page to this page. If you h	r creditors with PRIORITY claims and Part 2 for result in a claim. Also list executory contracts s (Official Form 106G). Do not include any cred operty. If more space is needed, copy the Part ave no information to report in a Part, do not fill Claims.	s on Schedule A/B: Pro litors with partially sec you need, fill it out, nu	perty (Official Fo cured claims that mber the entries	rm 106A/B) and on are listed in in the boxes on the
	ors have priority unsecured claims a				
No. Go to F	, ,	gamos you.			
Yes.	all Z.				
2. List all of y listed, ident much as po	tify what type of claim it is. If a claim has possible, list the claims in alphabetical or	editor has more than one priority unsecured claim, both priority and nonpriority amounts, list that claider der according to the creditor's name. If you have marticular claim, list the other creditors in Part 3.	m here and show both p	priority and nonprio	rity amounts. As
ŭ	·	nstructions for this form in the instruction booklet.)			
(i oi aii exp	nation of each type of claim, see the	not determine the most determine to	Total claim	Priority	Nonpriority
				amount	amount
2.1.					
		Last 4 digits of account number			
Priority Cr	reditor's Name	When was the debt incurred?			
Number S	Street City State Zip Code	As of the date you file, the claim is: Check all Contingent	that apply		
Who incurred	d the debt? Check one.	☐ Unliquidated			
Debtor 1 o	only	☐ Disputed			
Debtor 2 of	only				
	and Debtor 2 only	Towns of PRIORITY and a second a leiter			
_	ne of the debtors and another	Type of PRIORITY unsecured claim:			
	this claim is for a community debt	☐ Domestic support obligations			
Is the claim s	subject to offset?	☐ Taxes and certain other debts you owe the o			
□ No		Claims for death or personal injury while you	were intoxicated		
☐ Yes		Other. Specify			_
Part 2: List A	II of Your NONPRIORITY Unsec	ured Claims			
	ors have nonpriority unsecured clain				
		this form to the court with your other schedules.			
	To houring to report in this part. Submit	and form to the boart with your other soriedules.			
Yes.					
unsecured clair	m, list the creditor separately for each of	e alphabetical order of the creditor who holds e laim. For each claim listed, identify what type of cla r creditors in Part 3.If you have more than three no	aim it is. Do not list claim	ns already included	I in Part 1. If more

Total claim

Official Form 106 E/F

Debto	r 1 Vivian Birdelle Samuel		Case number (if known)	19-54990-mlo	
4.1	Ally Financial Nonpriority Creditor's Name	Last 4 digits of account number	1226		\$9,632.00
	Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438	When was the debt incurred?	Opened 09/18 Last 9/24/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	Other. Specify Lease			
4.2	AMCOL Systems, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	1257		\$1.00
	Attn: Bankruptcy Po Box 21625	When was the debt incurred?	Opened 8/01/18 La 2/26/19	ast Active	
	Columbia, SC 29221 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	• ,	, , , , , , , , , , , , , , , , , , , ,		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	Other. Specify Collection	Attorney Providence	Hospital	
4.3	Bank of America	Last 4 digits of account number	4138		\$1.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50	When was the debt incurred?	Opened 03/17 Last 10/04/18	Active	
	Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	in plans, and other similar do	hte	
	<u> </u>	• • •	•	.bio	
	☐ Yes	Other. Specify Credit Card	· · · · · · · · · · · · · · · · · · ·		

Debto	¹ Vivian Birdelle Samuel		Case number (if known)	19-54990-mlo	
4.4	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	8581		\$3,224.00
	Attn: Correspondence Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 05/15 Last 7/17/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	tration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	Other. Specify Credit Card	I		
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7190		\$1,992.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 01/17 Last 7/17/19	Active	
	Salt Lake City, UT 84130	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	_	По и			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar de	bts	
	Yes	Other Specify Credit Card	l		
4.6	Christian Financial CU	Last 4 digits of account number	2800		\$1.00
	Nonpriority Creditor's Name Attn: Bankruptcy 18441 Utica Rd	When was the debt incurred?	Opened 01/14 Last 1/30/16	Active	
	Roseville, MI 48066 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	O continuent			
	Debtor 2 only	☐ Contingent☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	w nlong and other-size!	háo	
	■ No	Debts to pension or profit-sharin	•	DIS	
	☐ Yes	Other. Specify Automobile)		

Debto	or 1 Vivian Birdelle Samuel		Case number (if known) 19-54990-mlo	
4.7	Christian Financial CU Nonpriority Creditor's Name	Last 4 digits of account number	7913	\$1.00
	Attn: Bankruptcy 18441 Utica Rd Roseville, MI 48066	When was the debt incurred?	Opened 01/16 Last Active 8/31/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Automobile	•	
4.8	Christian Financial CU Nonpriority Creditor's Name	Last 4 digits of account number	4499	\$1.00
	Attn: Bankruptcy 18441 Utica Rd	When was the debt incurred?	Opened 05/16 Last Active 8/31/18	
	Roseville, MI 48066 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	7.5 or and date y ou me, and claim.	o. Onook all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.9	Chrstn Fn Cu	Last 4 digits of account number	2707	\$2,209.00
	Nonpriority Creditor's Name Attn:Bankruptcy Dept 18441 Utica Rd	When was the debt incurred?	Opened 06/16 Last Active 7/17/19	
	Roseville, MI 48066 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No □ Yes			
	Li res	Other. Specify Credit Card		

Vivian Birdelle Samuel		Case number (if known) 19-54990-ml	0
Citi/Sears	Last 4 digits of account number	1135	\$3,960.00
Nonpriority Creditor's Name Citibank/Centralized Bankruptcy		Opened 08/15 Last Active	·
Po Box 790034 St Louis, MO 63179	When was the debt incurred?	8/10/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Student loans		
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of alverse that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citibank	Last 4 digits of account number	7006	\$3,199.00
Nonpriority Creditor's Name	_		<u> </u>
Attn: Recovery/Centralized Bankruptcy	When was the debt incurred?	Opened 04/17 Last Active 7/17/19	
Po Box 790034	when was the dept incurred:	7/11/19	
St Louis, MO 63179	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	Labet a	
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citibank/Sears	Last 4 digits of account number	6669	\$1.00
Nonpriority Creditor's Name	_	Opened 0/00/45 Leet Active	
Attn: Bankruptcy Po Box 6275	When was the debt incurred?	Opened 8/06/15 Last Active 2/11/16	
Sioux Falls, SD 57117	When was the dest mounted.	2/11/10	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other Specify Charge Acc		

Debto	or 1 Vivian Birdelle Samuel		Case number (if known) 19-54990-mlo	
4.1 6	First PREMIER Bank	Last 4 digits of account number	6821	\$1.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 8/06/10 Last Active 9/16/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 7	First PREMIER Bank	Last 4 digits of account number	3434	\$1.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 8/05/11 Last Active 9/16/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 8	MABTC/Tidewater Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	0712	\$1.00
	Attn: Bankruptcy Po Box 13306 Chesapeake, VA 23325	When was the debt incurred?	Opened 11/14/17 Last Active 2/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	•		
	□ res	Other. Specify Charge Acc	Jount	

Debte	or 1 Vivian Birdelle Samuel		Case number (if known)	19-54990-mlo	
4.1 9	Navient	Last 4 digits of account number	0320		\$1,156.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640	When was the debt incurred?	Opened 03/98 Last 9/18/19	Active	
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	bts	
	Yes	☐ Other. Specify			
		Educationa	ıl		
4.2 0	Navient	Last 4 digits of account number	0224		\$430.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640	When was the debt incurred?	Opened 02/98 Last 7/18/19	Active	
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
		☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar de	bts	
	☐ Yes	Other. Specify			
		Educationa	ıl		
4.2 1	One Detroit Credit Union	Last 4 digits of account number	2000		\$1.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 32584 Detroit, MI 48232	When was the debt incurred?	Opened 12/16 Last 5/18/17	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	<u> </u>	Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	ng plans, and other cimilar do	hts	
	_			DIG	
	☐ Yes	Other. Specify Unsecured			

Debto	or 1 Vivian Birdelle Samuel		Case number (if known) 19-54990-mlo	
4.2	Russell Collection Agency, Inc.	Last 4 digits of account number	0009	\$160.00
	Nonpriority Creditor's Name G-3285 Van Slyke Road Flint, MI 48507	When was the debt incurred?	Opened 04/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection Pilc	Attorney Southfield Rad Assoc	
4.2	Synchrony Bank/Sams Club Nonpriority Creditor's Name	Last 4 digits of account number	9030	\$94.00
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 04/17 Last Active 8/25/19	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.2 4	Synchrony Bank/TJX Nonpriority Creditor's Name	Last 4 digits of account number	2441	\$1.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 7/19/15 Last Active 1/21/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other Specify Charge Acc	count	

Vivian Birdelle Samuel		Case number (if known) 19-54990-mlo	
Synchrony Bank/TJX	Last 4 digits of account number	0207	\$1
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 7/19/15 Last Active 8/26/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/TJX	Look & divide of account according	2961	\$ 1
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 7/19/15 Last Active 5/15/17	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
0 - 1 D - 1 M/1 4		0000	•
Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	<u>2999</u>	\$1
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 6/05/17 Last Active 8/26/18	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
— INO	Dobto to policion of profit-stialif	g plane, and other official dobto	

Attn: Bankruptcy Po Box 9475	When was the debt incurred?	Opened 08/15 Last Active 5/29/16		
Minneapolis, MN 55440	mion was the dest meaned.	0/20/10		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-shari	ng plans, and other similar debts		
Yes	Other. Specify Credit Care	d		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	1,586.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,329.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,915.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	Vivian Birdelle Sa	amuel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number	19-54990-mlo			
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Knob In The Woods
20800 Knob Woods Dr.
Southfield, MI 48076

State what the contract or lease is for
Rent, \$845.00

Fill in this	information to identify yo	our case:			
Debtor 1	Vivian Birdelle	• *********			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for th	e: EASTERN DISTRICT OF M	ICHIGAN		
Case num	ber 19-54990-mlo				
(if known)	10 04000 11110			☐ Check if this is an amended filing	
Officia	l Form 106H				
Sched	lule H: Your Co	debtors		12/15	
fill it out, a your name 1. Do	and number the entries in and case number (if known		Additional Page	tion. If more space is needed, copy the Additional Pag to this page. On the top of any Additional Pages, write e as a codebtor.	-,
■ No □ Yes	S				
2. Wit	hin the last 8 years, have	you lived in a community prope	rty state or territo	ory? (Community property states and territories include	
Arizon	na, California, Idaho, Louisia	na, Nevada, New Mexico, Puerto	Rico, Texas, Wash	hington, and Wisconsin.)	
■ No.	. Go to line 3.				
		spouse, or legal equivalent live wit	h you at the time?		
			•		
	□ No □ Yes.				
		state or territory did you live?		. Fill in the name and current address of that person.	
	City	State	Zip Code	е	
	City	Otato	210 0000		
in line Form out Co	e 2 again as a codebtor or	ly if that person is a guarantor	or cosigner. Make	or if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Office 06G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb	ial fill
	Name, Number, Street, City, State a	nd ZIP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
_				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	_
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-54990-mlo Doc 10 Filed 10/30/19 Entered 10/30/19 16:11:13 Page 26 of 38

E-111	to this to form of the co						•				
	in this information to btor 1	Vivian Birde									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	tcy Court for the	: EASTERN DISTRICT	OF MICHIGAN							
	se number 19-	54990-mlo		-			□ A		ed filing ent showin	g postpetition	
\bigcirc	fficial Form	1061								ollowing date:	
_	chedule I: `		ome				N	IM / DD/ Y	YYY		12/15
spo atta	use. If you are sep ch a separate shee	parated and you tet to this form. Employment	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not inclu onal pages, write yo	ide infori	mati	on about	your spoumber (if	ouse. If me known). A	ore space is answer every	needed,
	information.	•		Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed □ Not employed				☐ Empl	oyed mployed		
	employers.		Occupation	Caregiver							
	Include part-time, self-employed wo		Employer's name	Trusted Care at	Home,	Inc	<u> </u>				
	Occupation may in or homemaker, if		Employer's address	725 S. Adams # Birmingham, M							
			How long employed t	here? 3 years	5						
Pai	rt 2: Give Det	tails About Mor	nthly Income								
	imate monthly inco		ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your noi	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the information	on for all e	empl	oyers for	that perso	on on the li	nes below. If y	you need
							For Del	otor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	1	,698.95	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	1,69	98.95	\$	N/A	

Deb	tor 1	Vivian Birdelle Samuel	_		Case	number (if k	nown) _	19-54	1990-n	nlo		
					For	Debtor 1				Debtor -filing s		e	
	Cop	by line 4 here	4.		\$	1,69	8.95	5	\$	9	•	/A	
5.	l iet	t all payroll deductions:				-		_					
J.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	24	7 20	,	\$		N.	/ A	
	5b.	Mandatory contributions for retirement plans	5b		\$ _		7.38 0.00	_	\$			<u>/A</u> /A	
	5c.	Voluntary contributions for retirement plans	50		\$_		0.00	_	\$			/A	
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	_	\$			/A	
	5e.	Insurance	5e) .	\$		0.00	_	\$			/A	
	5f.	Domestic support obligations	5f.		\$	(0.00)	\$		N	/A	
	5g.	Union dues	50	J.	\$		0.00)	\$		N	/A	
	5h.	Other deductions. Specify:	5h	1.+	\$_	(0.00) +	\$		N.	/A_	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	34	7.38	3	\$		N	/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,35	1.57	7	\$		N	/A_	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total											
		monthly net income.	88		\$_		0.00)_	\$		N.	/A_	
	8b.	Interest and dividends	8b).	\$		0.00)	\$		N	/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_		0.00	_	\$			/A_	
	8d.	• •	80		\$_		0.00		\$			/A_	
	8e.	Social Security	8€) .	\$_	1,76	6.00)_	\$		N.	/A_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	(0.00)	\$		N	/A	
	8g.	Pension or retirement income	8g	J.	\$	(0.00)	\$		N	/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$	(0.00) +	\$		N	/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	1,76	6.00)	\$		ı	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,117.57	+	\$		N/A	= \$	_ 3	3,117.57
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	r depe								e J. +\$		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies								12.	\$_	3	3,117.57
											Com		
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?								mon	ınıy	income
		Yes. Explain:											

	in this informa	ition to identify yo	our case.			1		
Deb				al		Cha	eck if this is:	
Den	tor i	Vivian Birde	iie Samu	eı			An amended filing	
	tor 2							wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	SAN		MM / DD / YYYY	
Cas	e number 19	9-54990-mlo						
(If kr	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Evnor	1606				12/15
Be a	as complete a	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this				or supplying correct
Pari	t 1: Descr Is this a joir	ribe Your House	ehold					
1.	No. Go to							
			in a separ	ate household?				
	□ N		·					
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do vour ext	enses include	_					☐ Yes
0.	expenses o	f people other t	han $_{m au}$	No Yes				
	yourself and	d your depende	nts?	103				
		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
(·,						
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	845.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.		36.00
				upkeep expenses		4c.		30.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.	\$ \$	0.00
			,	,				

Official Form 106J Schedule J: Your Expenses 19-54990-mlo Doc 10 Filed 10/30/19 Entered 10/30/19 16:11:13 Page 29 of 38

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this inform	ation to identify your	case:			
Debtor 1	Vivian Birdelle Sa				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
Case number 19	9-54990-mlo				
(if known)				☐ Check if t	
				amended	Tiling
Official Form Declarati		ın Individual	Debtor's Sche	edules	12/15
If two married peo	ple are filing togethe	r, both are equally respo	nsible for supplying correct	information.	
obtaining money	•	n connection with a bank		aking a false statement, concealing p nes up to \$250,000, or imprisonment	
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bank	cruptcy forms?	
■ No					
☐ Yes. Na	ame of person			Attach Bankruptcy Petition Prepa Declaration, and Signature (Office	,

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Vivian Birdelle Samuel	X
Vivian Birdelle Samuel Signature of Debtor 1	Signature of Debtor 2
Date October 30, 2019	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	l in this infor	mation to identify you	r case:			
De	btor 1	Vivian Birdelle S		Leat Name		
De	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
		19-54990-mlo				
(if k	nown)				-	heck if this is an mended filing
					<u>.</u>	
O	fficial Fo	<u>rm 107</u>				
St	atement	of Financial	Affairs for Indivic	luals Filing for B	ankruptcy	4/19
					equally responsible for suppy additional pages, write you	
		n). Answer every ques	•		additional pages, write you	Thame and odde
Pa	rt 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married	I				
	■ Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No					
	_	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the la	ast 8 vears. did vou ev	ver live with a spouse or lec	al equivalent in a commun	ity property state or territory	? (Community property
					co, Texas, Washington and W	
	No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Expla	in the Sources of You	r Income			
4.	Did you hay	re any income from en	nnlovment or from operatin	a a husiness during this ve	ar or the two previous calen	idar vears?
	Fill in the total	al amount of income yo	u received from all jobs and a have income that you receive	Ill businesses, including part-	time activities.	iddi yedio.
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until	■ Wages, commissions,	\$12,224.00	☐ Wages, commissions,	
the	e date you file	ed for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	pulu		morado ordan	or o mamo
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes. No					
	Yes. Fill in the details.				-	
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	No. Go to line 11.☐ Yes. Fill in the information below.					
	Creditor Name and Address				Date Value of prop	
	Within 90 days before you filed for bankrup	Explain what happened		ancial inatitution	and off any on	
11.	accounts or refuse to make a payment bec		uding a bank of in	ianciai institutioi	i, set on any ai	nounts from your
	Yes. Fill in the details. Creditor Name and Address	Describe the action the	creditor took		action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possess	taker		it of creditors, a
	■ No □ Yes					
Pa	tt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gifts	with a total value	of more than \$60	00 per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Date:	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Case number (if known) 19-54990-mlo

Official Form 107

Debtor 1 Vivian Birdelle Samuel

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Deb	otor 1 Vivian Birdelle Samuel		Case number (if know	⁽ⁿ⁾ 19-54990-m	nlo				
			_						
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cont		ntributions with a total valu	e of more than \$	\$600 to any charity?				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			tes you ntributed	Value				
Part	t 6: List Certain Losses								
	Within 1 year before you filed for bankrupto or gambling?	y or since you filed for bankru	otcy, did you lose anything l	because of theft	, fire, other disaster,				
	■ No								
	☐ Yes. Fill in the details.								
	how the loss occurred	escribe any insurance coverage clude the amount that insurance lesurance claims on line 33 of Sche	nas paid. List pending loss	te of your s	Value of property lost				
Pari	t 7: List Certain Payments or Transfers								
	•			_					
	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition pre	paring a bankruptcy petition?			ty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of transferred		te payment transfer was de	Amount of payment				
	Frego & Associates - The Bankruptcy Law 23843 Joy Road Dearborn Heights, MI 48127	Attorney Fees	8/2	1/2019	\$100.00				
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and value of transferred		te payment transfer was de	Amount of payment				
	Within 2 years before you filed for bankrup transferred in the ordinary course of your build like the like the properties of your build like the li	usiness or financial affairs? ade as security (such as the gran		•					
	Person Who Received Transfer	Description and value of	Describe any p	roperty or	Date transfer was				
	Address Person's relationship to you	property transferred	payments recei paid in exchang	ived or debts	made				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No							
	Yes. Fill in the details. Name of trust	Description and v	alue of the prop	perty trans	ferred	Date Transfer was made		
	List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?							
	Include checking, savings, money market, or chouses, pension funds, cooperatives, associate ■ No ■ Yes. Fill in the details.		•		t; shares in banks, credit	unions, brokerage		
		ast 4 digits of ccount number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No							
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	and ZIP Code) Address (Number, Street, City,		Describe the contents		Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?		
Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in tru for someone. No Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
	t 10: Give Details About Environmental Informathe purpose of Part 10, the following definitions							
-	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	to own, operate, or utilize it, including disposal sites.							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No					
	□ No.	Yes. Fill in the details.	Carraman and all resid		Fusing months law if you	Data of motion	
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any release of hazardous material?						
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
		No					
	Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Par	11:	Give Details About Your Business or 0	Connections to Any Business				
		_	•		f the fallewing connections to an	, husiness?	
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
	 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	_						
	No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
	Address		Describe the nature of the business		Employer Identification number Do not include Social Security		
			me of accountant or bookkeeper		Dates business existed		
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
		No					
		Yes. Fill in the details below.					
		me dress nber, Street, City, State and ZIP Code)	Date Issued				
	,	,,,,					

Debtor '	1 Vivian Birdelle Samuel	Cas	e number (if known)	19-54990-mlo
Part 12	Sign Below			
are true	ead the answers on this <i>Statement of Financial A</i> and correct. I understand that making a false st ankruptcy case can result in fines up to \$250,00 C. §§ 152, 1341, 1519, and 3571.	atement, concealing property, or ob	taining money or	
/s/ Vivi	ian Birdelle Samuel			
	Birdelle Samuel ure of Debtor 1	Signature of Debtor 2		
Date	October 30, 2019	Date		
Did you ■ No □ Yes	attach additional pages to Your Statement of Fig.	nancial Affairs for Individuals Filing	for Bankruptcy (C	Official Form 107)?
Did you	pay or agree to pay someone who is not an atto	rney to help you fill out bankruptcy	forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No